

**New Hampshire Small Employer Health Reinsurance Pool**  
**Projection of Cash (Deficit)/Surplus as of**  
**09/30/06**

This projection of cash is for the six months ended	09/30/06
Number of months in prior period	9
Gross principal amount available on line of credit	50,000

**Projection of Available cash based on Prior period results**

Cash balance, end of prior period	590,023	
Collection of premium receivable	0	
Estimated Cash Available	590,023	
ADD:		
Projected earned premium	387,727	
<b>Total projected available cash</b>		977,750

**Projection of cash needs based on prior period results**

DEDUCT:		
Claims payable, end of prior period	0	
Note Payable (Advance on LOC)	(30,000)	
Professional and Other Payable	(1,207)	
Estimated claims submissions for the next 6 months	0	
Administrative and other expenses	(15,183)	
<b>Total projected cash needs</b>		(46,390)

Projected cash deficiency		931,360
Amount available from Line of Credit		20,000

<b>Net total projected cash (Deficit)/Surplus</b>		951,360
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New Hampshire Small Employer Health Reinsurance Pool							sehra
All Carriers							
Accepted Premium By Age Band					As Of 03/31/2006		
Rate Type	Age Band	Current Premium	Avg Current Premium	YTD Premium	Avg YTD Premium	12 Month Premium	Avg 12 Month Premium
Adult							
	Under 25	\$8,565.64	\$389.35	\$8,565.64	\$389.35	\$8,565.64	\$389.35
	25 - 29	\$15,433.68	\$701.53	\$15,433.68	\$701.53	\$15,433.68	\$701.53
	30 - 34	\$21,836.98	\$727.90	\$21,836.98	\$727.90	\$21,836.98	\$727.90
	35 - 39	\$44,326.29	\$681.94	\$44,326.29	\$681.94	\$44,326.29	\$681.94
	40 - 44	\$102,472.64	\$853.94	\$102,472.64	\$853.94	\$102,472.64	\$853.94
	45 - 49	\$80,438.26	\$1,018.21	\$80,438.26	\$1,018.21	\$80,438.26	\$1,018.21
	50 - 54	\$86,333.50	\$1,015.69	\$86,333.50	\$1,015.69	\$86,333.50	\$1,015.69
	55 - 59	\$101,608.68	\$1,431.11	\$101,608.68	\$1,431.11	\$101,608.68	\$1,431.11
	60 - 64	\$38,171.27	\$1,231.33	\$38,171.27	\$1,231.33	\$38,171.27	\$1,231.33
	65 Plus	\$42,111.82	\$2,807.45	\$42,111.82	\$2,807.45	\$42,111.82	\$2,807.45
Child							
	0 Plus	\$40,292.24	\$312.34	\$40,292.24	\$312.34	\$40,292.24	\$312.34
Total	All Ages	\$581,591.00		\$581,591.00		\$581,591.00	

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All Carriers				
Lives Count By Ceding Basis And Plan Type		As Of 3/31/2006		
Ceding Basis	Plan Type	Ceded	Terminated	Active
Group				
	HMO	107	0	107
	Indemnity	4	0	4
	POS	12	0	12
	PPO	33	0	33
Group Total		156	0	156
Individual				
	HMO	228	0	228
	Indemnity	3	0	3
	POS	30	0	30
	PPO	71	0	71
Individual Total		332	0	332
Total		488	0	488